

### **Health Reform Initiative**

# Table Top Scenario #1 Aetna – Peggy has gallbladder disease

#### Background

People often assume there is a market cost for medical procedures that most facilities adhere to. However, costs for the same procedure can vary hundreds to thousands of dollars among facilities. This has a big impact on how much members spend for their co-insurance and how much the county pays for the procedure.

#### Scenario

Peggy, a 40 year old woman has had pain in her stomach for the past two nights. Last night the pain kept her awake. She called the nurseline to see if she should go to the emergency room and after asking her several questions, the nurse gave her some recommendations for how to manage her pain overnight, and recommended that Peggy call her doctor first thing in the morning. After examining Peggy the next morning, her doctor sends her for an ultrasound, which confirms that Peggy does in fact have a diseased gallbladder. Peggy's doctor recommends that she have a **Laparoscopic Cholecystectomy**, or surgery that removes the gallbladder through a scope. The surgery can be performed as an outpatient procedure.

Given that she will pay co-insurance, Peggy wants to know the average cost ranges of having a **Laparoscopic Cholecystectomy**. Peggy lives within the 98144 zipcode, and would like to see the range of costs by facility for all medical centers within 15 miles of her zipcode. Peggy also wants to learn more about gallbladder disease, such as the causes, symptoms, treatments and surgery options available to help her talk with her doctor.

### Challenge

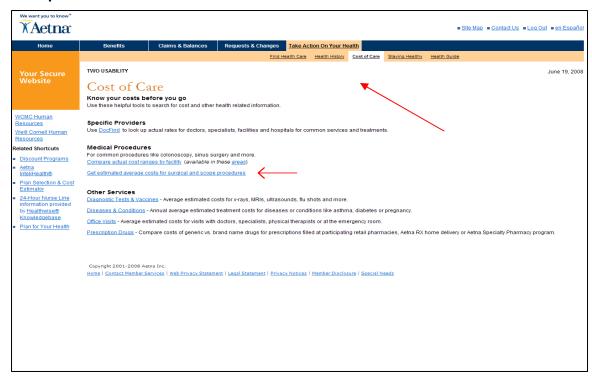
- 1. How can Peggy compare the average cost for her procedure within 15 miles of her 98144 zipcode?
- 2. How can she use the Aetna SmartSource tool to learn more about gallbladder disease?

#### **Tools**

Go to Aetna Navigator (<u>www.aetnanavigator.com</u>).

Username: **USABILITY02B** Password: **aetna2aetna** 

# Q a2. Click on "Take Action On Your Health" and then "Cost of Care." Click on the "Get estimated average costs for surgical and scope procedures"



Peggy enters the following search criteria:

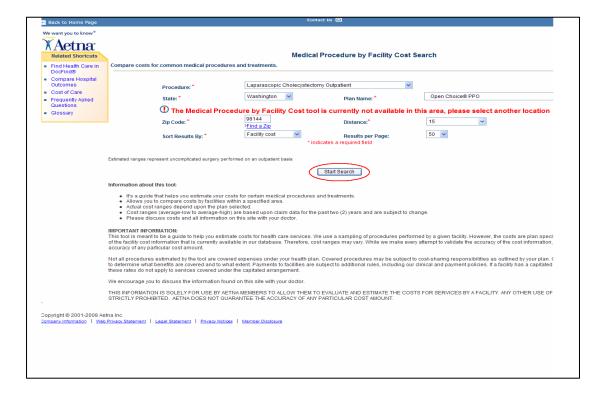
- Procedure: Laparoscopic Cholecystectomy Outpatient

State: WashingtonZipcode: 98144

- Sort Results by: Facility cost

- Plan: Open Choice PPO (under Aetna Standard plans)

- Distance: 15 miles



Q2. How can Peggy use the Aetna SmartSource tool (within Aetna Navigator) to educate herself on the causes, symptoms, and possible surgery options for gallbladder disease?

#### **Tools**

a. Click on the "Back to home page" button on the left-hand side of screen. Then, search "Gallbladder Disease" within Aetna SmartSource.

b. Under the "All" tab, click on the **Cholodocholithiasis** Health Map bubble to review surgery options. Peggy can also review other pertinent health information on Gallbladder disease under the "All" tab.



#### **Outcome**

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
- 4. Get employees to understand what they pay is not the cost of health care, but only their share.



# Table Top Scenario #2 Aetna – Amy has a high risk pregnancy

### Background

A 1999 report by the Institute of Medicine found that up to 98,000 Americans die every year from preventable medical errors made in hospitals alone. In fact, there are more deaths in hospitals each year from preventable medical mistakes than there are from vehicle accidents, breast cancer, or AIDS. Patients have few options for controlling medical errors that occur when they are admitted to the hospital, but there is information available on the quality and safety of care provided at local area hospitals for specific procedures.

#### Scenario

Amy is a 38 year old woman who has just learned that she is pregnant. She knows that because she is over the age of 35 hers will be considered a high risk pregnancy. Amy lives in the downtown Seattle area and has a choice of hospitals where she will deliver her baby. She wants to make the best possible choice of hospital based on the performance of each hospital in managing high risk pregnancies.

### Challenge

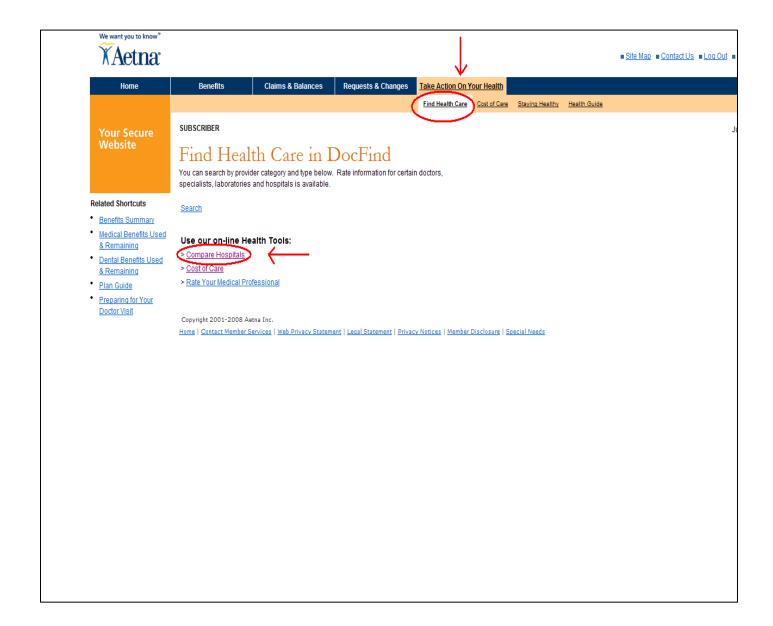
1. How can Amy use the Aetna hospital comparison tool to check the safety of care provided at the hospitals where she could deliver her baby within 10 miles of her 98112 zip code?

#### Tools

Go to Aetna Navigator (www.aetnanavigator.com)

Username: **phrfindguest1** Password: **phrfindguest1** 

a. To find the hospital comparison tool, Amy goes to the "Take Action on your Health" tab, selects "Find Health Care" and then clicks on "Compare Hospitals." This tool shows side by side comparisons of local hospitals to aid patients in finding the best facility for their needs.



Amy clicks through the warnings that she is leaving a secure Aetna site.

b. To get information about safety at hospitals where she is considering delivering her baby, Amy enters the following search criteria:

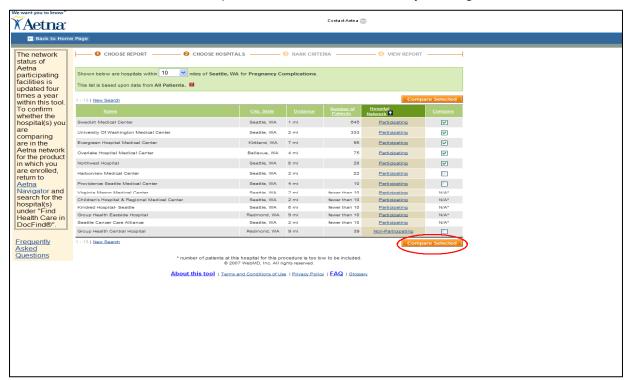
Category: Mothers and Babies

Procedure/Diagnosis: Pregnancy Complications

Location: 98112 Within: 10 miles



c. Amy has the option of comparing her results by checking the box of different locations, and clicking on "Compare selected." After she creates the report, she can get more information on how each hospital rates on certain criteria by clicking on the tabs.



#### Outcome

- 5. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 6. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 7. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
- 8. Get employees to understand what they pay is not the cost of health care, but only their share.



# **Table Top Scenario #3 Aetna – Ben has diabetes**

### **Background**

The Institute of Medicine's 2001 landmark book, *Crossing the Quality Chasm*, delineated 10 "design rules" for improving care. The success of six of these 10 "rules" depends directly on patients' involvement in their care. Recognizing the importance of having relevant information available to patients for management of their medical conditions, David Brailer, national coordinator for health information technology in the Department of Health and Human Services, has made personal health records a cornerstone in the national strategy for health information technology.

KingCare members now have access to their own Personal Health Record, or PHR, through Aetna Navigator. Personal Health Records offer a number of potential benefits to patients, their physicians and the health care system. These include:

- **Empowerment of patients.** PHRs let patients verify the information in their medical record and monitor health data about themselves (very useful in chronic disease management). PHRs also provide scheduling reminders for health maintenance services.
- **Improved patient-provider relationships.** PHRs improve communication between patients and clinicians, allow documentation of interactions with patients and convey timely explanations of test results.
- **Increased patient safety.** PHRs provide drug alerts, help identify missed procedures and services, and get important test results to patients rapidly. PHRs also give patients timely access to updated care plans.
- **Improved quality of care.** PHRs enable continuous, comprehensive care with better coordination between patients, physicians and other providers.
- More efficient delivery of care. PHRs help avoid duplicative testing and unnecessary services. They provide more efficient communication between patients and physicians (e.g., avoiding congested office phones).

- Better safeguards on health information privacy. By giving patients control of access to their records, PHRs offer more selectivity in sharing of personal health information. The PCASSO (patient-centered access to secure systems online) study at the University of California-San Diego suggests that PHRs are more secure than paper records.
- **Bigger cost savings.** Improved documentation brought about by PHRs can decrease malpractice costs. PHRs' ability to reduce duplicative tests and services is a factor here, too.

#### Scenario

Ben is a 46 year old man recently diagnosed with Diabetes. His PHR provides drug alerts, helps identify missed procedures and services, and get important test results to him rapidly. In fact, Ben's personal health record recently notified him by email that he has a new alert. Ben would like to read this alert in case it regards his Diabetes treatment.

#### Challenge

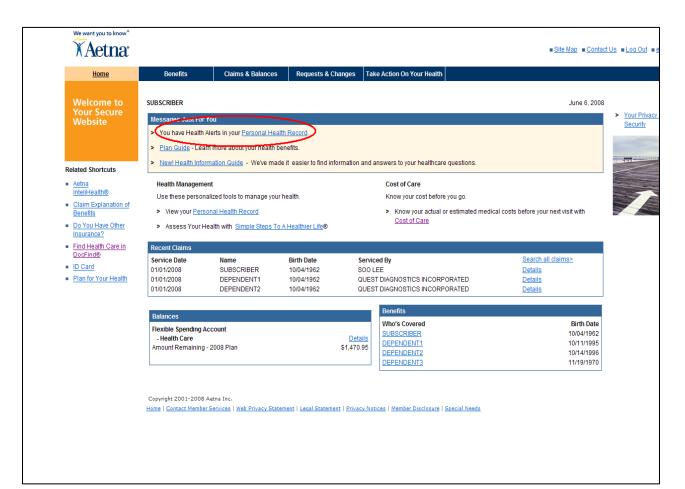
- 1. After receiving the email alert notification, how does Ben go into his PHR to read his secure alerts?
- 2. After reading the PHR alert, how can Ben also use Aetna Navigator to remind him of age and medical appropriate screenings?

#### Tools

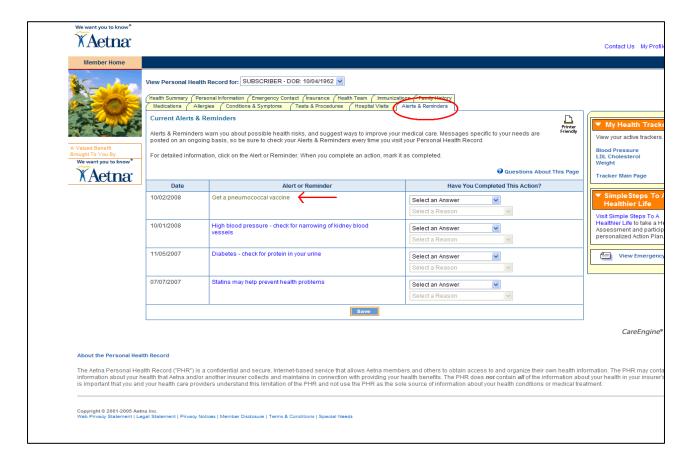
Go to Aetna Navigator (<u>www.aetnanavigator.com</u>).

Username: phrffamguest1 Password: phrffamguest1

Then click on "Personal Health Record".

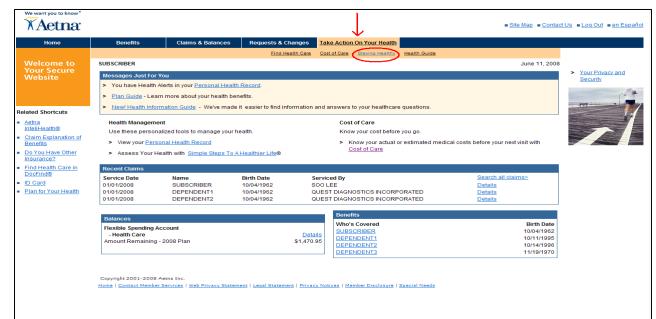


Ben clicks on the alert to get more information about why he needs the pneumococcal vaccine.

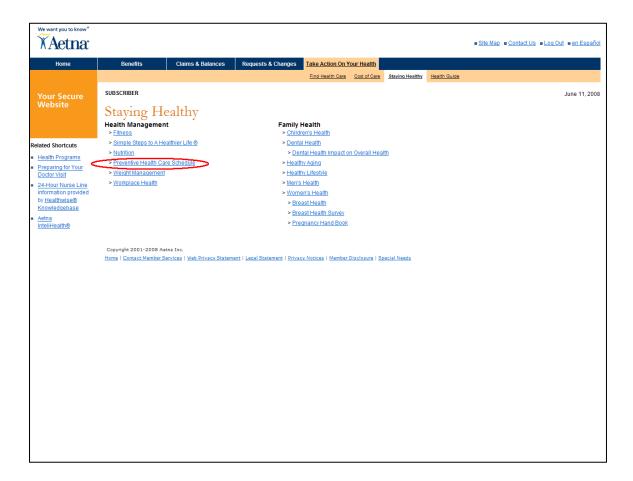


2. After reading the PHR alert, Ben decides he wants to know more about age and gender appropriate health screenings.

Ben returns to his Aetna Navigator homepage by clicking on the "Member Home" link on the top left corner of the screen, and then click on the "Take Action on your Health" tab to view what other screenings are recommended.



b. Ben clicks on the "Staying Healthy" link, and select the Preventative Health Schedule for his age range and gender.



#### Outcome

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
- 4. Get employees to understand what they pay is not the cost of health care, but only their share.



# Table Top Scenario #4 Puget Sound Health Alliance – Bill has low back pain

# Background

Ineffective care is driving up the cost of health care. A RAND study estimates that in the Puget Sound area, 41 cents of every health care dollar goes toward health care that doesn't improve your health. Following evidence-based guidelines for care – that is, care that medical evidence shows actually works so you get the right care at the right time -- can significantly improve your health and, over time, drastically reduce the cost of health care. Earlier this year, the Puget Sound Health Alliance, which was founded by King County Executive Ron Sims, issued its first Community Checkup Report which shows the percentage of time patients receive care that follows evidence-based guidelines. King County was a major funder of this groundbreaking effort, which has received national recognition. It paves the way for future reports that will include more data from more clinics and hospitals and will drill down even further.

This information is available to the public via the web.

#### Scenario

Bill is a bus driver who has been recently diagnosed with low back pain. He has talked to fellow bus drivers about his back pain and knows many of them have had MRIs. Bill goes to see his doctor at Group Health Capitol Hill Medical Center. After taking his medical history and performing an exam, Bill's doctor says an MRI is not necessary and recommends physical therapy. Bill wants more information on the recommended treatment for someone with low back pain and which clinics in the area have patients whose care follows those guidelines most of the time.

# Challenge

- 1. Bill is curious why his buddies got MRI's and his doctor said he needs physical therapy. How can Bill use the Puget Sound Health Alliance Community Checkup Report to make sure he is getting the right treatment?
- 2. How can Bill find information on the percentage of time his clinic, Group Health Capitol Hill Medical Center, follows the evidence-based guidelines for low back pain?

#### **Tools**

The Puget Sound Health Alliance offers the Community Checkup Report on the web. There, information can be found describing the evidence-based guidelines for certain conditions and shows the percentage of time patients at area clinics receive care that fits within the guidelines. By mid-summer, the report will be available in an easier-to-use searchable format too.

- 1. Go to: www.wacommunitycheckup.org
- 2. Click on Low Back Pain on the left hand menu.
- To find out if his doctor's recommendation of physical therapy for low back pain was evidence based, Bill scrolls through the narrative on evidence based guidelines to evaluate care options.
- 4. To find out how his clinic, Group Health Capitol Hill Medical Center, rates as far as following evidence based guidelines for the treatment of low back pain, Bill scrolls to the clinic ratings to find Group Health. <u>Tip:</u> You can make the screen landscape instead of portrait by right clicking the mouse and choose rotate clockwise.

#### Outcome

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
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# **Table Top Scenario #7 ESI – Filling a prescription**

### Background

In 2007, King County paid more than \$19 million for prescription coverage of KingCare members. The county could save up to \$4 million if members chose to fill all their prescriptions with generic drugs instead of brand name drugs where clinically appropriate. The county could save an additional \$64,000 if members chose to get their maintenance medications through Express Scrips Home Delivery instead of at a retail pharmacy. KingCare members could realize close to \$400,000 in copay savings by filling maintenance medications through mail order.

#### Scenario

Susan is a 55 year old woman who takes advantage of the yearly preventive visit to her doctor covered by her King County benefits. At her last annual visit, her cholesterol was high. She tried to get her cholesterol to come down through diet and exercise alone, but in a follow-up visit to her doctor, her cholesterol was still above 200. Given her family history of high cholesterol and coronary artery disease, Susan's doctor recommended that she start on medication to reduce her cholesterol as a maintenance drug. After discussing all of the options, **Susan chose to start on Zocor. Her doctor is starting her on a daily 20 mg dose.** 

#### Challenge

1. How can Susan find the lowest cost options including a) the drug and possible alternatives and b) the delivery method.

#### Tools

The county's pharmacy vendor, Express Scripts, offers Susan options for how to fill her prescription that can save her and the county money.

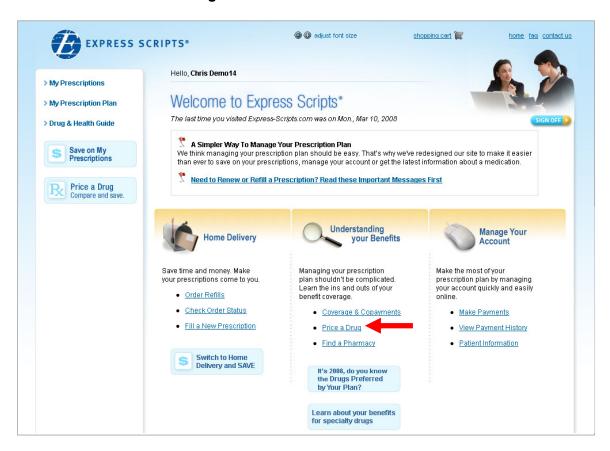
Go to: <a href="https://www.express-scripts.com/user-Name">www.express-scripts.com/user-Name</a>: TESTKCW38002

Password = password

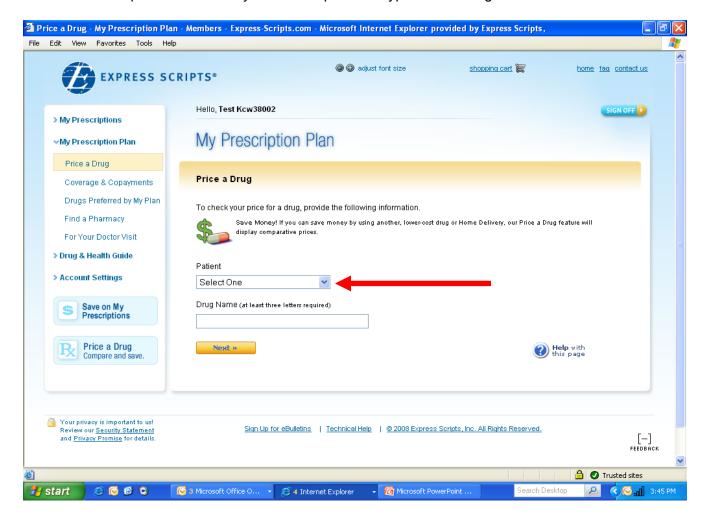
Susan enters her username and password.



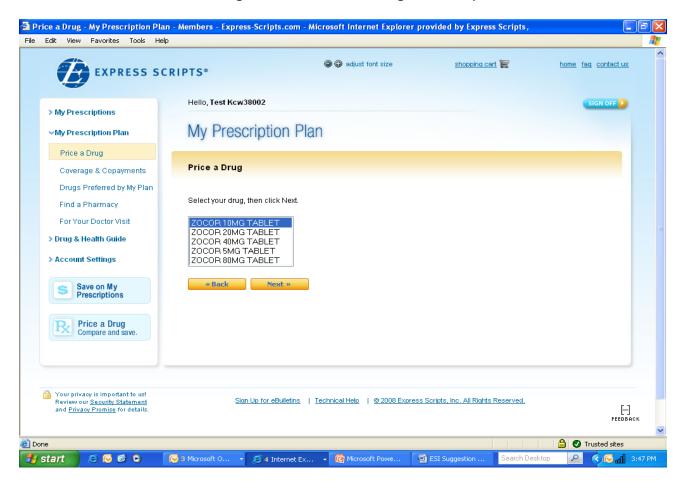
# Susan clicks on "Price a Drug."



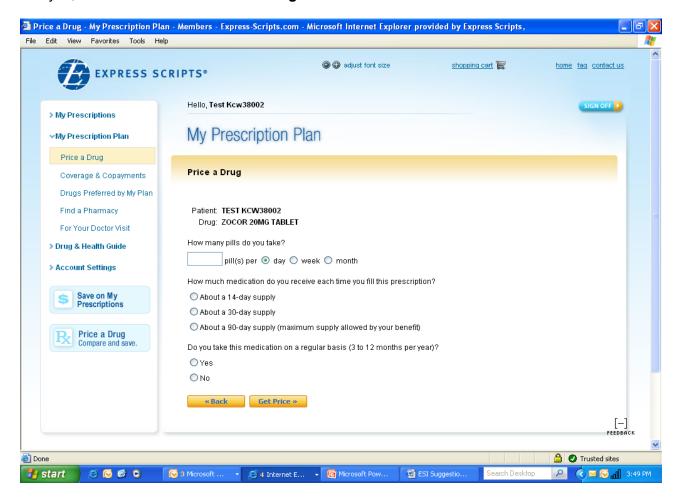
Susan selects a patient covered by her health plan and types in the drug name "Zocor."



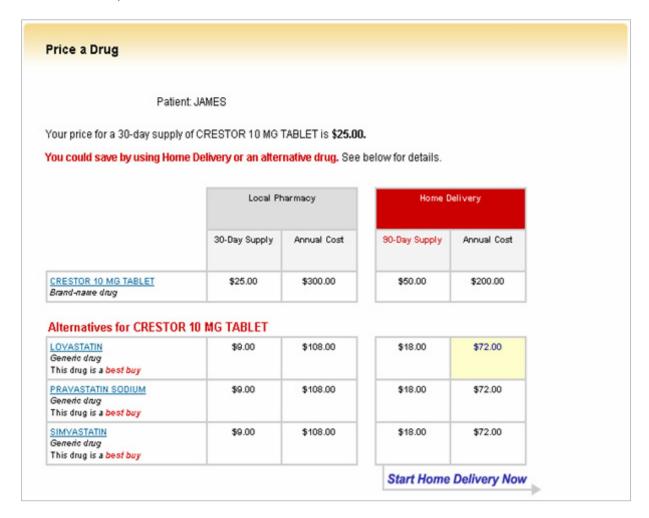
Susan selects the correct dosage and name of the drug from the pull down menu.



Susan indicates she will **take 1 tablet a day**. She receives a **90 day supply** and checks that yes, she is on the medication on a **regular basis**.



The results help Susan make the best choice for herself.



#### **Outcome**

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
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# **Table Top Scenario #5 Group Health – Fred has Diabetes**

#### Background

Chronic conditions impact the county's health care spending and productivity. A study of chronic disease in the Dow Chemical Company workforce using the Stanford Presenteeism Scale calculated that the average cost per employee with self reported chronic conditions amounted to \$2,278 for medical care, \$661 for absenteeism and \$6,721 for work impairment. One of the keys to effective disease management is an active and involved relationship between a patient and doctor where the patient takes an active role in managing his or her health. A personal health record can play a key role here.

The Institute of Medicine's 2001 landmark book, *Crossing the Quality Chasm*, delineated 10 "design rules" for improving care. The success of six of these 10 "rules" depends directly on patients' involvement in their care. Recognizing the importance of having relevant information available to patients for management of their medical conditions, David Brailer, national coordinator for health information technology in the Department of Health and Human Services, has made personal health records a cornerstone in the national strategy for health information technology.

KingCare members can now create a personal health record through Aetna Navigator. Personal health records offer a number of potential benefits to patients, their physicians and the health care system. These include:

- Empowerment of patients. PHRs let patients verify the information in their medical record and monitor health data about themselves (very useful in chronic disease management). PHRs also provide scheduling reminders for health maintenance services.
- **Improved patient-provider relationships.** PHRs improve communication between patients and clinicians, allow documentation of interactions with patients and convey timely explanations of test results.
- **Increased patient safety.** PHRs provide drug alerts, help identify missed procedures and services, and get important test results to patients rapidly. PHRs also give patients timely access to updated care plans.

- **Improved quality of care.** PHRs enable continuous, comprehensive care with better coordination between patients, physicians and other providers.
- **More efficient delivery of care.** PHRs help avoid duplicative testing and unnecessary services. They provide more efficient communication between patients and physicians (e.g., avoiding congested office phones).
- Better safeguards on health information privacy. By giving patients control of access to their records, PHRs offer more selectivity in sharing of personal health information. The PCASSO (patient-centered access to secure systems online) study at the University of California-San Diego suggests that PHRs are more secure than paper records.
- **Bigger cost savings.** Improved documentation brought about by PHRs can decrease malpractice costs. PHRs' ability to reduce duplicative tests and services is a factor here, too.

#### Scenario

Fred has diabetes and is very interested in activity managing his condition in partnership with his doctor at Group Health. However, he finds it hard to keep track of all of the information such has his lab results and his doctors instructions. He is also interested in learning more about his condition and treatment.

Group Health has an online shared medical record that is integrated with the doctor's electronic medical record so patients can see their lab results and graph things like cholesterol, blood pressure, weight and height. This can help Fred track his lab results, see the after visit summary his doctor writes up in his medical record and further research his condition and treatment. While Fred is reviewing his personal health record, he has a question he wants to ask his doctor about having a foot exam. He is able to e-mail his doctor directly. If his doctor recommends that Fred schedule a visit, he can request an appointment through MyGroupHealth.

#### Challenge

- 1. How can Fred use Group Health's shared medical record to keep track of vital information like his blood glucose levels and after visit summaries written by his doctor?
- 2. How can Fred use www.ghc.org to find more information on treatment of diabetes?
- 3. How can Fred use MyGroupHealth to e-mail a question to his doctor?

#### Tools

Double click on the Group Health Fred Has Diabetes icon on your desktop.

#### Outcome

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.

- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
- 4. Get employees to understand what they pay is not the cost of health care, but only their share.



# **Table Top Scenario #6**Group Health – Ashley needs a vaccination

### **Background**

The Institute of Medicine's 2001 landmark book, *Crossing the Quality Chasm*, delineated 10 "design rules" for improving care. The success of six of these 10 "rules" depends directly on patients' involvement in their care. Recognizing the importance of having relevant information available to patients for management of their medical conditions, David Brailer, national coordinator for health information technology in the Department of Health and Human Services, has made personal health records a cornerstone in the national strategy for health information technology. Personal health records offer a number of potential benefits to patients, their physicians and the health care system. These include:

- Empowerment of patients. PHRs let patients verify the information in their medical record and monitor health data about themselves (very useful in chronic disease management). PHRs also provide scheduling reminders for health maintenance services.
- **Improved patient-provider relationships.** PHRs improve communication between patients and clinicians, allow documentation of interactions with patients and convey timely explanations of test results.
- **Increased patient safety.** PHRs provide drug alerts, help identify missed procedures and services, and get important test results to patients rapidly. PHRs also give patients timely access to updated care plans.
- **Improved quality of care.** PHRs enable continuous, comprehensive care with better coordination between patients, physicians and other providers.

- More efficient delivery of care. PHRs help avoid duplicative testing and unnecessary services. They provide more efficient communication between patients and physicians (e.g., avoiding congested office phones).
- Better safeguards on health information privacy. By giving patients control of access to their records, PHRs offer more selectivity in sharing of personal health information. The PCASSO (patient-centered access to secure systems online) study at the University of California-San Diego suggests that PHRs are more secure than paper records.
- **Bigger cost savings.** Improved documentation brought about by PHRs can decrease malpractice costs. PHRs' ability to reduce duplicative tests and services is a factor here, too. (Of course, there is a cost for setting up a PHR. The price varies widely, based on whether the physician pays for the service or directs patients to subscribe, and whether the system is Web-based or stand-alone.)

#### Scenario

Ashley works at DNRP and is 30 years old. She will be working in the field surveying streams and there is a possibility she will be around some old boards with rusty nails. She thinks it would be a good idea to make sure her tetanus vaccination is up-to-date.

Group Health has an online shared medical record that is integrated with the doctor's electronic medical record so patients can see their lab results and graph things like cholesterol, blood pressure, weight and height. It also tracks vaccinations.

#### Challenge

- 1. How can Ashley use her shared medical record to check on when she had her last tetanus shot?
- 2. How can Ashley get more information on whether her tetanus shot is still active or if she needs another one?

#### Tools

Double click on the Group Health Ashley needs a vaccination icon on your desktop.

Go to: www.ghc.org

#### Outcome

- 1. Manage risk upstream prevention of chronic disease by encouraging employees to eat smart, move more, stress less and quit tobacco.
- 2. Choose well -- help employees be smarter health care consumers. Educate them about how their choices impact health care costs and outcomes.
- 3. Empower employees to be partners in managing their own health care give employees the tools they need to pro-actively manage their own health and ensure they are getting the best treatment possible.
- 4. Get employees to understand what they pay is not the cost of health care, but only their share.